

JUL 29 2005

POSZ LAW GROUP, PLC

ATTORNEYS AT LAW

12040 SOUTH LAKES DRIVE, SUITE 101
RESTON, VA 20191

SPECIALIZING IN PATENTS, TRADEMARKS & COPYRIGHTS

TEL: (703) 707-9110
FAX: (703) 707-9112
WWW.POSZLAW.COMDAVID G. POSZ
JAMES E. BARLOW *
BRIAN C. ALTMILLER
ROBERT L. SCOTT, II
CYNTHIA K. NICHOLESON* NOT ADMITTED IN VIRGINIA
PRACTICE LIMITED TO FEDERAL PATENT,
TRADEMARK AND COPYRIGHT MATTERSFACSIMILE TRANSMISSION

Date: 29 July 2005 **Pages:** 26
To: Examiner Michael J. Zanelli **From:** Brian C. Altmiller
Company: USPTO, Art Unit 3611
Fax No.: 571-273-8300
Subject: Response to Office Action: App. Serial No. 10/279,936 (Atty. Dkt. 01-516)

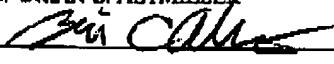
Comments:

Applicant: ITO et al.	Atty. Dkt.: 01-516
Serial No.: 10/729,936	Art Unit: 3661
Filed: 12/9/2003	Examiner: ZANELLI
Title: MAP EVALUATION SYSTEM, COLLATION DEVICE, AND MAP EVALUATION DEVICE	Confirmation No.: 2400
Mail Stop Amendment Commissioner for Patents U.S. Patent and Trademark Office Customer Window, Mail Stop Amendment Randolph Building 401 Dulany St. Alexandria, VA 22314	Date: 29 July 2005

CERTIFICATE OF TRANSMISSION

I hereby certify that this correspondence is being facsimile transmitted to the United States Patent and Trademark Office, Fax No. (571) 273-8300 on July 29, 2005, to the attention of Examiner Michael J. Zanelli of AU 3661.

Typed Name: BRIAN C. ALTMILLER

Signature: 

The information contained in this facsimile transmission is intended only for the above-indicated addressee, and may contain privileged and confidential attorney work product or trade secret information. Any dissemination, distribution or copying of any part of this transmission is strictly prohibited. If you have received this transmission in error, please immediately notify the sender, and return the transmission to the sender at the above-indicated address.

This Form Based on PTO/SB/21

TRANSMITTAL FORM <i>(to be used for all correspondence after initial filing)</i>		Application Number	10/729,938
		Filing Date	December 9, 2003
		First Named Inventor	ITO
		Group Art Unit	3681
		Examiner Name	Michael J. Zanelli
		Attorney Docket Number	1-518

ENCLOSURES (check all that apply)			
<input checked="" type="checkbox"/> Fee Transmittal Form <input checked="" type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment / Response <input type="checkbox"/> After Final <input type="checkbox"/> Affidavite/declaration(s) <input checked="" type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/ Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.63	<input type="checkbox"/> Assignment Papers (for an Application) <input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition Routing Slip (PTO/SB/69) and Accompanying Petition <input type="checkbox"/> To Convert a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation <input type="checkbox"/> Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Small Entity Statement <input type="checkbox"/> Request of Refund	<input type="checkbox"/> After Allowance Communication to Group <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input type="checkbox"/> Additional Enclosure(s) (please identify below):	
Remarks			

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm or Individual name	Pozz Law Group, PLC BRIAN C. ALTMILLER (Reg. No. 37,271)
Signature	
Date	29 JULY 2005

CERTIFICATE OF FACSIMILE TRANSMISSION

I hereby certify that this correspondence is being facsimile transmitted to the USPTO (Fax. No. 571-273-6300) on this date: July 29, 2005 to the attention of Examiner Michael J. Zanelli, Art Unit 2856.

Typed Name: Brian C. Altmiller.

Signature: 

RECEIVED
CENTRAL FAX CENTER

JUL 29 2005

PTO/SB/17 (12-04)

Approved for use through 07/31/2008. OMB 0651-0032
U.S. Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

Effective on 12/3/2004.
Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).**FEE TRANSMITTAL
For FY 2005** Applicant Claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT (\$ 170)

Complete if Known

Application Number	10/728,838
Filing Date	December 9, 2003
First Named Inventor	ITO
Examiner Name	Michael J. Zanelli
Art Unit	3881
Attorney Docket No.	1-618

METHOD OF PAYMENT (check all that apply)

Check Credit Card Money Order None Other (please identify): _____

Deposit Account Deposit Account Number 50-1147 Deposit Account Name Pozz Law Group, PLC
For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)

Charge fee(s) indicated below Charges fee(s) indicated below, except for the filing fee

Charge any additional fee(s) or underpayments of fee(s) under 37 CFR 1.16 and 1.17 Credit any overpayments

WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2089.

FEE CALCULATION**1. BASIC FILING, SEARCH, AND EXAMINATION FEES**

Application Type	FILING FEES		SEARCH FEES		EXAMINATION FEES		Fee Paid (\$)
	Small Entity	Fee (\$)	Small Entity	Fee (\$)	Small Entity	Fee (\$)	
Utility	300	150	500	250	200	100	
Design	200	100	100	50	130	65	
Plant	200	100	300	150	160	80	
Reissue	300	150	500	250	600	300	
Provisional	180	80	0	0	0	0	

2. EXCESS CLAIM FEES**Fee Description**

Each claim over 20 or, for Reissues, each claim over 20 and more than in the original patent

Small Entity	Fee (\$)	Fee (\$)
--------------	----------	----------

Each independent claim over 3 or, for Reissues, each independent claim more than in the original patent

Small Entity	Fee (\$)	Fee (\$)
--------------	----------	----------

Multiple dependent claims

Small Entity	Fee (\$)	Fee (\$)
--------------	----------	----------

Total Claims	Extra Claims	Fee (\$)	Fee Paid (\$)	Multiple Dependent Claims	Fee (\$)	Fee Paid (\$)
21	- 20 or HP = 1	x \$50	= \$50			

HP = highest number of total claims paid for, if greater than 20

Indep. Claims	Extra Claims	Fee (\$)	Fee Paid (\$)		
8	- 8 or HP = 0	x \$200	= \$0		

HP = highest number of independent claims paid for, if greater than 3

3. APPLICATION SIZE FEEIf the specification and drawings exceed 100 sheets of paper, the application size fee due is \$ (\$ for small entity)
for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41 (a)(1)(G) and 37 CFR 1.16(s).

Total Sheets	Extra Sheets	Number of each additional 50 or fraction thereof	Fee (\$)	Fee Paid (\$)
- 100 =	/ 50 =	(round up to a whole number) x		

4. OTHER FEE(S)

Non-English Specification, \$130 fee (no small entity discount)

Other: One Month Extension of Time \$120

SUBMITTED BY		Registration No. (Attorney/Agent)	Telephone
Signature		37,271	(703) 707-8110
Name (Print/Type)	BRIAN C. ALTMILLER		Date July 29, 2005

This collection of information is required by 37 CFR 1.136. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 30 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.

RECEIVED
CENTRAL FAX CENTER
JUL 29 2005

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant: ITO et al.	Atty. Dkt.: 01-516
Serial No.: 10/729,936	Art Unit: 3661
Filed: 12/9/2003	Examiner: ZANELLI
Title: MAP EVALUATION SYSTEM, COLLATION DEVICE, AND MAP EVALUATION DEVICE	Confirmation No.: 2400

Mail Stop Amendment
 Commissioner for Patents
 U.S. Patent and Trademark Office
 Customer Window, Mail Stop Amendment
 Randolph Building
 401 Dulany St.
 Alexandria, VA 22314

Date: 29 July 2005

CERTIFICATE OF TRANSMISSION	
<p>I hereby certify that this correspondence is being facsimile transmitted to the United States Patent and Trademark Office, Fax No. (571) 273-8300 on July 29, 2005, to the attention of Examiner Michael J. Zanelli of AU 3661.</p> <p>Typed Name: BRIAN C. ALTMILLER  Signature: </p>	

AMENDMENT UNDER 37 CFR 1.111

Sir:

In response to the office action mailed April 21, 2005, the period for response to which has been extended through August 22, 2005, (August 21, 2005, being a Sunday) by the filing of a petition for extension of time, please amend the application as follows:

Amendments to the Claims are reflected in the listing of claims that begins on page 2 of this paper.

08/02/2005 MBINAS 00000012 501147 10729936
 02 FC:1202 50.00 DA

Remarks begin on page 16 of this paper.